



WELL COMPLETION/ RE-COMPLETION REPORT

Form No. R3 (Formerly Form No. R4-8-1991)
Revised on 8/16/1999

INDIANA DEPARTMENT OF NATURAL RESOURCES

Division of Oil and Gas
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Purpose of report

☐ Completion ☐ Re-completion ☐ Conversion

☐ Check here if you want the completion information to remain confidential for 1 year.

FOR STATE USE ONLY

Date filed Date released

PART I GENERAL INFORMATION									
Name of operator					Telephone number () -			Permit number	
Address of operator (<input type="checkbox"/> Check here if this is a new address)									
City					State			Zip code	
PART II LOCATION INFORMATION									
Name of lease					Well number			Elevation (G.L.)	
Section	Township	Range	¼	¼	¼	Footage's: ft. from <input type="checkbox"/> N, <input type="checkbox"/> S, <input type="checkbox"/> NW, <input type="checkbox"/> SE line ft. from <input type="checkbox"/> E, <input type="checkbox"/> W, <input type="checkbox"/> NE, <input type="checkbox"/> SW line			
County		Distance to the nearest well capable of producing from the same formation ____ ft. Note: This information is only required for Oil, Gas and Dual completion wells.							
PART III WELL CONSTRUCTION									
NOTE: This information is not required for Geologic/ structure test wells or Individual/ county test holes									
Casing Specifications			Cement (In Sacks or Cubic Feet)				Hole		
Casing size O.D. (Inches)	Wt./ ft. (lbs.) - Grade	Setting depth	Stage 1 Volume	Stage 1 Class- yield per sack	Stage 2 or total volume if 1 stage	Stage 2 or total Class- yield per sack	Depth	Diameter (Inches)	
Surface	lbs. -	ft.		-		-	ft.		
Intermed.	lbs. -	ft.		-		-	ft.		
Long str.	lbs. -	ft.		-		-	ft.		
Tubing	lbs. -	ft.							
Packer setting depth ____ ft. Packer setting depth ____ ft. Packer setting depth ____ ft.			Centralizers at ____ ft. ____ ft. ____ ft. ____ ft. Casing perforated From ____ ft. to ____ ft. From ____ ft. to ____ ft. From ____ ft. to ____ ft. From ____ ft. to ____ ft.				NOTE: For Class II Enhanced recovery and Saltwater disposal wells the well construction information must match the specifications of the written permit. If the information is different you must submit form no. A7 to request a modification of the existing permit conditions.		
PART IV COMPLETION INFORMATION									
Completion type (Check one only)									
<input type="checkbox"/> Dry hole			<input type="checkbox"/> Gas storage/ observation well			<input type="checkbox"/> Enhanced recovery Class II well			
<input type="checkbox"/> Oil well			<input type="checkbox"/> Geologic/ structure test well			<input type="checkbox"/> Dual completion Oil/ Class II well			
<input type="checkbox"/> Gas well			<input type="checkbox"/> Non potable water supply well			<input type="checkbox"/> Dual completion Gas/ Class II well			
<input type="checkbox"/> Non commercial gas well			<input type="checkbox"/> Saltwater disposal Class II well						
Date (Enter one only)			Tools			Total Depths			
Completed			.			Drillers ft.			
Re-completed			Rotary from ft. to ft.			Loggers ft.			
Converted			Cable from ft. to ft.						
IMPORTANT: THIS FORM MUST BE SUBMITTED WITHIN 30 DAYS AFTER THE WELL COMPLETION OR RE-COMPLETION									

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1. Only those persons whose names appear in PARTS V or VI of the Organizational Report are authorized to sign this report.
2. **If this is a directional or horizontal well you must submit a copy of the directional survey with this report.**

3. You must submit 3 copies of ALL geophysical logs run on this well.